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#### Section 2: What Is The Nature Of The Problem?

The elderly, and people who work to help them, are now unable to fully appreciate or utilize the information infrastructure. We believe this lack of access seriously undermines our nation's ability to adequately respond to a rapidly expanding elderly population. The government at all levels, is in a severe fiscal crisis. At the same time, we face increasing demands to provide more social and health services to the frail elderly. To address this demand, we need to exchange and integrate critical client information, streamline the service delivery system, and improve direct access to information for the consumer. This will help control the growth in public expenditures while we serve this nation's fastest growing population segment more effectively.

To do this, we have to give aging service workers timely and comprehensive information about the clients they serve. Policy makers need improved techniques to share information and evaluate the needs of this population. Mobile elderly and their caregivers must be empowered to access services independently, freeing workers to spend time with those in greatest need, particularly the homebound. And we must provide communication links among the many providers serving the same client to reduce duplication of effort and provide higher quality, more efficient and effective services for the client.

# What Is Our Proposed Solution To The Problem?

We propose to develop the Aging Services Network (ASNET). With THAP funds, we will create a telecommunications and information infrastructure (TII) for New York's 59 local Area Agencies on Aging and their provider network. This "Aging Network" is a formal system which spans the country. It consists of government, non-profit and private providers in every community. These agencies contract with the Area Agencies on Aging (AAA) - the planning and direct service agencies whose mission is to develop and coordinate community wide systems of services for the elderly. The AAAs are primarily funded by a State Offices for the Aging, which receive funding and direction from the U.S Administration on Aging (AOA).

With TIIAP funds we will apply TII to New York's emerging Aging Services Client Based Management System, an expert software system that assists workers to integrate and better manage a multitude of aging services. The resources, combined, will leverage Federal, State and local investments to create a seamless interactive network which ultimately enables service integration for the elderly and dramatically impacts the management of these programs.

With the support of many public and private agencies, including the NYC Department for the Aging and three national aging organizations, ASNet will be a model for the country's Aging Network. (See TAB: Quals/Partners) ASNet will accomplish this by linking NYS Aging Network, demonstrating advanced methods of applying TII to coordinate the services of diverse providers in several select communities, and by testing methods of advanced information sharing through remote access, kiosks and access to aging related information through the World Wide Web.

# To accomplish this, ASNet will:

- 1) Demonstrate connectivity with secured Internet access and gateways for interconnectivity at State, AAA and provider levels through LANs and dial up PPP accounts to enable the sharing of critical client, service and program information.
- 2) Demonstrate the value of remote connectivity to a central client data base through the use of notebook computers so that field workers can serve the isolated elderly more effectively.
- 3) Establish a World Wide Web (WWW) Server at SOFA with FTP and Gopher servers. Through a Home Page, we will create and open doors to information so that AAAs and consumers can browse, conduct business and access a wide body of program information.
- 4) Place portions of CBS on publicly accessible kiosks in New York City, and through Internet access to this link on our Home Page, to enable the more mobile elderly and their caregivers to access information and services independently.

#### What Is The Structure And Role Of The National Aging Network?

Established and funded under the Older Americans Act of 1965, the national Aging Network's primary mission is to ensure the development of a comprehensive and coordinated system of services to help older people remain independent in their communities and avoid unnecessary placement in institutional facilities such as nursing homes. The Network covers the entire geographic area of the United States and its territories and consists of the U.S. Administration on Aging, 57 State Units on Aging (SUAs), 660 local Area Agencies on Aging, and 27,000 service providers. The current capacity of the Aging Network to carry out its mission varies dramatically across the country, reflecting local realities and funding constraints that vary from state to state, and even within states at the community level. This network serves this country's 32.8 million elderly. (See Tab: Quals/Partners)

In New York, a network of 59 AAAs coordinates and delivers services to the State's 3.5 million elderly residents. The staff size of AAAs varies considerably based on the population they serve, their available resources and their level of automation. AAAs rely on many local providers such as senior centers, home care and adult day care programs to provide a variety of services such as home delivered meals, transportation, benefits counseling and in-home personal care. (See Tab: Quals/Partners)

# What Is The Challenge Facing This Network?

In addition to the aging network, services for the elderly are also provided through other social services and health systems, for example Food Stamps, Medical Assistance and Supplemental Security Income. Programs and services provided for Older Americans are often complex, fragmented and difficult for older people to understand or access. Programs have been legislated, funded and developed separately, each providing a unique service type, delivery system and eligibility requirement. This creates a bureaucratic maze that confuses consumers.

The elderly, particularly those with frailty and limited mobility, find it difficult, if not impossible to make the resulting complex system work for them. The result is that:

- Older persons do not receive appropriate, comprehensive services to meet their multiple needs
- o People who are less able to negotiate the system remain underserved.
- o Government and individual resources are not efficiently or effectively utilized.

To address these problems, numerous strategies have been tried. These strategies include: physical consolidation of service functions, cross training of staff, co-location of service providers, centralized Information and Referral services, and so on. These approaches have had minimal effect in integrating services and making them more accessible. This is the case in part because the type and scope of information and the knowledge necessary to understand and apply the ever changing portfolio of programs to the client's complex needs is too voluminous. One strategy that we believe could dramatically alleviate this problem is the application of TII.

# What Were NYS's Initial Steps To Develop Technological Solutions?

Last year, to address the emerging need for client applications that integrate services and functions, SOFA joined in partnership with the nation's largest AAA, the New York City Department for the Aging (DFTA). We blended resources and approaches from two separate client application initiatives; one at DFTA called the Provider Data System (PDS), and one new application that SOFA was about to develop called the UNI-FORM Benefits Assessment System (UNI-FORM BAS).

PDS gives AAA and provider level staff a tool to handle client screening, assessment, care plan and file maintenance, as well to help with various agency management functions. The UNI-FORM BAS, to be linked to PDS, will screen, predict eligibility and produce applications for 11 federal and State entitlements and benefits - a virtual "one-stop-shop" for the applicant.

This New York State joint venture is now referred to as the Aging Services Client Based Management System (CBS). Our plan is to enhance the PDS and UNI-FORM BAS software and incorporate a client based reporting and service management system among providers, AAAs and SOFA. We will do this by blending of funds provided by SOFA, DFTA and several other CBS "Members" - those who fund it and have their programs in it. (See Tab: The CBS

TIIAP funds will enable us to create the infrastructure for sharing the CBS with Aging Network Staff across the State and the Nation. This will enable staff to have access (as appropriate considering privacy issues) to the data and knowledge it contains.

# Section 3: What Is The Importance Of This Problem And How Does It Fit With TIIAP?

Why Is There A Disparity Of Access By Those Who Serve This Nation's Fastest Growing Population?

While computerization in the Aging Network is rapidly expanding, there is no systematic approach to integration. According to recent State and national surveys, this vast network has few interactive electronic communication links to the Nation's expanding information infrastructure. For example, a survey done in early 1995 showed only 29 out of 59 NYS AAAs had modems. (See TAB:Footnts/Misc, for Nat'l and State survey documentation)

Although studies show the presence of computers, interactive systems are severely underutilized. This is due to a combination of factors such as lack of proper equipment, training, service integration software and an uncoordinated aging information infrastructure.

# How Will We Use Technology To Address This Disparity?

We propose to address this in three ways:

1) Through the Internet, enable the exchange of information between multiple human service providers

Linkages through the Internet will enable workers to share information across multiple provider agencies, client events and in numerous locations. The electronic communication capacity will enable workers to keep up-to-date with changes in services, client circumstances and program eligibility criteria. The elderly and those who serve them will have access to a comprehensive body of information, wherever they enter the system. For example, with a field worker in their home, independently from a shared computer located in a senior center, or in any one of a number of case management agencies. (See TAB: Graphics)

We will accomplish this by linking CBS - which contains service integration applications and program management functions, to the Internet. This system, when fully developed, will contain several client applications: 1) Intake and Referral Module providing a resource directory of services; 2) UNI-FORM BAS which assesses potential eligibility and delivers applications for up to 11 Federal and State benefits and entitlements; 3) Long Term Care Case Management Module (PDS) which provides case management functions of screening, intake, assessment, service plan, service authorization and client and provider management functions; and 4) The Service Module which collects and analyzes service data for all other network services. (See TAB: Graphics)

CBS will have at its core a client data base maintained at the AAA level which contains key client, service and program information. It also supports program management functions, such as reporting, analysis, quality assurance and billing.

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# 2) Reduce the barriers that block access to human services through the use of state of the art portable equipment and public access kiosks

State-of-the-art equipment will be provided to workers enabling them to serve the most isolated and underserved elderly in their own residences. Remote access will provide real time information to workers about the client or service availability.

We will join a public access kiosk project in NYC that will enable more mobile seniors and their caregivers to self-screen for services and locate information. This will enable workers to deal directly with people who are less able to help themselves. UNI-FORM's level one screening - which contains about 10 questions - will be available on the kiosks. Individuals will receive a paper print out indicating potential eligibility and the location of the nearest UNI-FORM benefit and application site. (See TAB: Quals and Partners, Letter from Herbert Stupp, DFTA)

# 3) Create a SOFA "Home Page" on the Web

Aging service professionals must keep up to date in their field in order to provide effective, quality services to an ever changing, diverse population. Therefore, we also propose to develop a WWW Server and interactive Home Page. This will dramatically improve access for aging service professionals and seniors to information about the latest research, program innovations, regulations, etc., as well as provide direct communication among program experts. (See Tab: Graphics)

The Home Page, accessible through the Internet, will enable long distance self screening (perhaps by long distance caregivers) for benefits and long term care services by providing level one portions of the UNI-FORM and LTC Case Management Modules of CBS.

#### How Can ASNet Serve As A National Model?

This project can serve as a national or international model because:

- o Despite the need, no comparable systems currently exist.
- o Discussions with our peer state agencies indicate considerable interest in our proposed system.
- o The Administration on Aging (AOA), the National Association of State Units on Aging (NASUA) and the National Association of Area Agencies
- on Aging (N4A), all National organizations that oversee and support aging services, recognize the need for such a model and are willing to assist in its dissemination. (See TAB: Support Ltrs)
- o The concept can be replicated by other human service networks, such as the Mental Retardation, Disability and Mental Health Networks. We've had numerous inquiries from a variety of sectors. (See TAB: Support Ltrs)

- Upon request, we demonstrated the system to government representatives from Japan and New Zealand, countries which face similar problems with their aging population.
- o One of the New York Delegate's top recommendations taken to the 1995 White House Conference for Aging was the need for a "universal computer network" to improve access to services for Older Americans. (See TAB: Footnts/Misc for text of the recommendation)

#### What Is The Fit With TIIAP?

The TIIAP is searching for projects that leverage Federal investments, have an impact on a major social problem which extends beyond the scope of the project, and can be a "blueprint" for other service systems. ASNet meets all of these requirements.

Reform of the health care and welfare delivery systems are major national policy issues facing this nation. ASNet will provide a model for using TII to address components of this problem. This model, because it is comprehensive and flexible, could eventually serve the nation's 32.8 million elderly - the fastest growing population in this country. (See TAB: Footnts/Misc. for aging demographics/trends) The model is transferrable to a wide range of systems, not just those noted above. Any system which has numerous, diverse providers who have common goals for serving a similar market segment could utilize the ASNet model.

# Section 4: How Will We Carry Out The Project?

This section addresses the first two years of ASNet encompassing the development of:

- service integration delivery models, scaled to be cost-effective in NYC and in three AAAs upstate. These upstate agencies will be geographically dispersed and have budgets ranging from under one million up to seven million dollars. (See TAB: Graphics)
- an Internet backbone and host model for state aging networks to provide public and secured information access and communications. (See TAB: Graphics)

The New York State Education and Research Network (NYSERNet) will be SOFA's primary provider of Internet connectivity, technical expertise and services required for ASNet. Technical support will also be obtained from NYSERTech, a technical user group of NYSERNet affiliates. DFTA, working with SOFTEK, Inc., a software development firm, will be the provider of software, which is referred to as PDS/UNI-FORM BAS, for integrated delivery models and related software expertise and support. Local leased lines will be provided primarily by NYNEX. LAN connectivity and long distance leased lines will be subcontracted through NYSERNet. IBM and NYNEX will provide contributions in the area of hardware and connectivity for local providers valued conservatively at \$350,000 (specifics to be determined, see letters of commitment in TAB: Quals/Partners)

SOFA will ensure dissemination and quick adoption of ASNet in numerous ways: staff presentations, the immediate development of a WWW home page, seeding the network with Internet access and e-mail, written communications including a newsletter, and the immediate establishment of a help desk at SOFA.

By the end of the second project year, 59 AAAs will be connected to SOFA, either via 28.8Kbps dial-up, or leased line connectivity developed locally or as part of the demonstrations described below. ISDN line connectivity will be used where available and cost effective. (See TAB: Graphics)

## **Integrated Delivery Models**

We will implement local demonstrations of service integration using CBS on micro computers, with full connectivity between workers, providers, AAAs and SOFA. CBS, fully described in the Appendix, runs on 486 PCs in either a stand-alone or a client/server environment.

We will test the feasibility and value of having AAAs maintain a client data base that is regularly updated by provider agencies, and accessible to authorized case workers for creating as well as searching and obtaining existing files.

Demonstrations for this aspect of ASNet will focus on integrating community based long term care services for the frail elderly. Access to these services are generally controlled by AAAs through contracts with local providers referred to as Case Management Agencies (CMAs). Staff who perform the services are generally referred to as Case Managers because they "manage" various aspects of the elderly person's case, including intake, screening, assessment, care planning, service scheduling, monitoring, reassessment and quality assurance. In this role, they work directly with numerous social, health and housing agencies in the locality, each with staff who also have a relationship with that same client. Theoretically, these various staff all work together to provide a comprehensive array of services which meet the complex needs of each client. The Case Manager does the overall coordination. Case Managers work out of the office, off site in community locations and also provide services in the person's residence.

Four AAAs will participate in the demonstrations, DFTA in NYC and three upstate. In these AAAs, six CMAs will be equipped with CBS and full connectivity. Each CMA will have PCs as well as remote equipment for four field staff, enabling them to do off site interviews when necessary. In these four demonstration sites a variety of other social and health service providers, such as hospitals, senior centers and home care agencies will be linked with each other, to the CMA and with the central client data base at the pilot AAAs. This will enable full linkage for all providers serving the same client. (See TAB: Graphics)

As noted above, field workers who work with the isolated elderly in their residence will be given notebooks, equipped with CBS Software. During the visit, if they need information or must perform a transaction, they will query the central client data base to obtain information, communicate with other staff, or access numerous other functions, such as those necessary to determine service availability. They will then complete the transaction and transmit the results back to their agency, where the file is updated.

Capacity for remote access may be provided by various contributions from NYNEX and IBM. Connectivity will be created using existing technology including wireless LANs and dial up modem access scaled to be cost effective for different size provider agencies.

Local government WANs will be used where possible to connect providers to AAAs and both to the Internet. In other site locations, the AAA/provider will be given software for simple dial up access, plus PPP account access to the Internet and SOFA host servers.

#### Internet Backbone and Host Model

SOFA will create WWW and Gopher access to information important to the elderly and their caregivers and the general public, as well as information that is important to AAAs and providers. FTP and e-mail servers will support file transfer and e-mail communications between all end users, and to sister agencies at federal, state and local levels that have internet connectivity.

The SOFA internal Ethernet LAN will be connected to NYSERNet by a 128 Kbps leased line, which is upscalable to T1 capacity without a new line installation. NYSERNet will install and maintain a Kentrox 128 Kbps-T1 CSU/DSU high speed modem and a 2501 Cisco Ethernet Router Configuration, and will install and support a Gauntlet firewall on a 486 or higher PC.

Servers will initially be established off site (i.e at NYSERNet) beginning with the WWW Home Page and e-mail server. The WWW server will be expanded, and FTP and Gopher servers will be added, as the information and doors to information services are developed. The information accessible via the servers will continue to be expanded during the two years of the project. All servers will be UNIX based and use commonly available software packages.

NYSERNet will provide training to SOFA staff on firewall security, systems administration, and all other facets of Internet host operations. They will also provide expert consultation and staff support during the initial development and implementation of servers, and ongoing support during the period of this project.

SOFA staff will be responsible for coordination of all NYSERNet activities, design of the Home Page and its information content, software content development, access to new information services and updates, SOFA Help desk and development, maintenance and implementation of security policies.

DFTA, through its contractor, SOFTEK, will provide support in the area of software development for a UNI-FORM BAS level one link on the Home Page which allows a user to screen for benefits; software development related to data transmission and connectivity for CBS and training and installations in the NYC sites.

# Aging Network Access To The Internet

We will provide 200 PPP accounts and associated Internet training to all 59 AAAs and their selected providers. This will give all AAAs and 141 providers access to the Internet and to SOFA's Server. Senior Centers and community agencies, which have these accounts, will be excellent sites for direct consumer access to everything available on the Internet, including SeniorNet and of course, all offerings through SOFA's Home Page.

# Interoperability and Existing Information Infrastructure

Existing infrastructures in NYC include: 1) the City Net, a network connecting government agencies and other organizations; 2) an internal DFTA LAN and mainframe; 3) a variety of service provider agency LANS and mini computer systems and a frame relay application in several settlement houses, some of which are DFTA providers.

Upstate existing infrastructures range from little to none to local government WANs in urban/metropolitan counties.

According to our recent caucus meetings around the state, counties are anxious to move ahead in this area, and in fact many already have, producing a variety of systems.

# Project Success, Monitoring And Sustainability

We believe ASNet will succeed for various reasons: because it is consumer driven, with many avenues for end user input and involvement; because the technology we've selected and software we've designed is flexible, interoperable with other systems and cost-effective; and; perhaps the most important, each of our partners has a stake in the project.

This project will be implemented using a quality management approach, using teams. We will obtain input from all stakeholders through focus groups, regular meetings with our AAA Committee Members and a Consumer Consortium. We will begin evaluation on day one. We will use a prototyping approach to the demonstrations. We have engaged high quality technical partners to perform many of the technical tasks and to serve in an advisory capacity. SOFA and DFTA's most experienced staff will be involved, including program, technical, management, legal, fiscal and marketing staff to bring to bear the variety of expertise required to build a complex system. The quality approach calls for constant re-evaluation so that, as technology becomes obsolete and new innovations occur, we will incorporate them into the system. (See TAB: Qual/Partner)

The strategic planning, funding and work effort for CBS was already underway before the TIIAP grant was announced. However, we recognize that an expanded effort, as proposed here, will require a great deal of labor and resources after the 2 year grant ends. Some of the solutions we plan to explore are:

o re-engineer work tasks and deploy existing staff resources differently

- o continue the precedent already set of requiring "member" fees for government agencies and private partners to participate in the CBS Application.
- o apply to the NYNEX Diffusion Fund for a commitment beyond 1997
- explore innovative revenue sources to charge or set user fees for certain services offered by the SOFA Host, i.e, portions of our CBS System, for example UNI-FORM.
  Or, local AAAs might request member or user fees to support the continuation of the system in their community.

# Section 5: What Are Our Qualifications And Who Are Our Partners?

The development of ASNet will be carried out through a public/private partnership with clearly defined roles:

NYSerNet, NYNEX and IBM will provide the TII capacity, including network installation and maintenance, some local and State agency equipment, communications software, Internet training, and technical support.

SOFA, DFTA, and the AAA Association Computer Committee will be responsible for project management, implementation, CBS software design and content development, Area Agency and provider site negotiations, agreements, site preparation, long term funding plans, portions of the evaluation, promotion and national dissemination.

DFTA, working with SOFTEK Inc., will provide software development, site preparation and installation, technical support, training and software/Internet links. (See TAB: Quals/Partners for description of SOFTEK, Inc.)

Other CBS Members will fund the content/software development of CBS, assist us in identifying and addressing privacy and policy issues related to electronic signatures, transmission of client data, optical scanning and so forth. These members include: NYNEX, the Social Security Administration, the Federal Administration on Aging, and the NYS Department of Tax and Finance. (See TAB: Quals/Partners for letters)

The entire project will be advised by a Consortium of consumer groups, end users and technical experts. (See TAB: Quals/Partners for member list)

While we have addressed only a few partners in the narrative, qualifications of each are included in the TAB: Qual/Partner and Funding is detailed in TAB: Budget, in the Statement of Matching and Operating Funds.

The New York State Office for the Aging: SOFA is one of the largest State Units on Aging in the country. In the past, we have served as leader of NASUA, the national association serving all 57 SUAs throughout the country. Over the past 20 years, we managed the organization and development of one of the country's largest State AAA networks - now 59 AAAs assisted by over 2000 aging service providers and their service delivery sites, serving the state's 3.5 Million elders. (See TAB: Quals/Partners)

SOFA developed one of the first automated reporting systems in the Aging Network. This system, Consolidated Area Agency Reporting System (CAARS) collects, analyzes and reports activity related to the many Federal, State and private funding streams that we administer. Because of our expertise, we played a key role on the National Advisory Committee to the National Aging Program and Information System (NAPIS), a client based reporting system required by the Older Americans Act.

The ASNet project director, Steve Walter, helped establish CAARS and is the team leader for the CBS system development. He has extensive background in managing large organizational restructuring projects, and is the agency's staff representative to the Administration on Aging's NAPIS Project, noted above. (See TAB: Resumes)

NYC Department for the Aging: DFTA is the nation's largest AAA. SOFA provides DFTA with Federal and State funds, technical assistance, support, monitoring, plan review and budget approval. In 1991, DFTA began a strategic planning effort to computerize many of its client and business functions. They did this with a consultant provided by the City's Department of Information, Telecommunications and Technology. After two years of planning they implemented a Case Information Management System (CIMS) which covered hundreds of providers. In 1993, they expanded to the case management provider application - PDS. Based on the strength and viability of DFTA's vision, this year's City budget includes \$2.3 million to provide computer hardware to 200 of DFTA's provider agencies.

One of DFTA's key staff devoted to this project is Vince Esposito. He is Director of Management Information Systems, and in that role, he is responsible for implementing all data processing initiatives for the agency. His latest achievement is the budget award, noted above, of \$2.3 million to equip the balance of all DFTA's provider agencies so that PDS can be used throughout the system. This is a remarkable achievement in light of the severe cutbacks in City services announced in May. It demonstrates the quality of PDS and the ability of DFTA to make the case for computerization, as a tool for better client service and government efficiency.

NYSERNet: NYSERNet is a high speed data network, connecting NYS to the global community of computing networks and resources - the Internet. NYSERNet was the first regional network of the NSFNet. Since 1986, they have delivered robust and reliable Internet connectivity to NYS. Their affiliate base includes over 600 organizations, including several major State agencies.

The Social Security Administration's SSI Outreach Branch administers a grant program to stimulate innovative methods to reach people who might be eligible for SSI Benefits. SOFA was awarded a grant to automate the SSI application, integrating it with 10 other State and Federal Benefits. This project, the UNI-FORM BAS, is one of the CBS modules. SSA is administering 5 other technology grants around the country, some PC-based and others on mainframe. As stated in their attached support letter, they see the connectivity provided by TIIAP as a potential avenue to test the electronic transmission of SSI applications, program eligibility changes and reporting between SSA and providers. Paula Laird, our Federal Project Director, is directing four other SSI Automation Projects around the country. She will play a key role in helping us address various policy and confidentiality issues of transferring knowledge about benefits, clients and program changes (including eligibility criteria) back and forth between system members.

# **Private Partners and National Organizations**

NYNEX, through a recently settled rate case, has a new to increase its activity in the area of infrastructure development. Through this "<u>Diffusion Program</u>", they will bring advanced telecommunications to areas of the state that would not quickly receive these services, if deployment is driven exclusively by the market. Projects which they intend to fund cover areas such as human services, education and public health. Diffusion funds must be used for network infrastructure, telecommunications services, hardware or customer premises equipment, and related training and evaluation.

IBM is rapidly expanding its mission to include Internet access through its Advantis Program, connectivity consultation and software development. As their letter indicates, they understand and want to actively assist in addressing the need to bring advanced telecommunications to the aging network.

#### Section 6: Who Will Benefit From The Project And How Will We Support End Users?

While the ultimate end user is actually the older person who benefits from the services and programs provided by the aging network, the most isolated and frail elderly are often assisted fully by aging service workers to access services. This project focuses on those who help and empower the ultimate end user. Surveys indicate that many aging service workers have computers, but don't necessarily use them to capacity. The reasons vary, but recent focus groups helped us categorize the barriers into 6 areas:

- 1) Staff do not have access to computers, particularly portables, or on line services.
- Where hardware does exist, training is lacking.
- 3) There are not enough useful applications to convince workers that time on the computer is worthwhile.
- 4) Human service workers generally hesitate to substitute computers for human interaction, because of perceived client resistance.
- 5) Worker caseloads are so time-consuming that they do not have time for training on and use of this new tool.
- 6) Workers are hesitant to use computers because of privacy issues.

#### To address these barriers we will do the following:

- o seed the network with state of the art hardware, Internet access and e-mail;
- o develop and provide useful applications, for example CBS (This will also reduce paperwork and duplicative applications, making caseloads more manageable.);

- o provide connectivity among providers so that they are motivated by the value it provides;
- o hold focus groups of end users to provide input into system design, both for programmatic accuracy and user friendliness; (This task alone will build ownership and knowledge so that the technology, when installed, will be familiar and welcomed.)
- o provide training directly to providers and, through applications like PC Anywhere, make it more available and cost effective as the programs expand to additional end users; Video conference trainings may also be employed.)
- o contract with NYSERNet to provide SOFA, AAAs and providers with Internet training through the regional NYSERNet Internet Training and Education Centers;
- through focus groups of workers and consultation with experts, address the need to maintain privacy of data, determine what data will be encrypted, what will be shared with whom and what approach will be used to provide assurances to clients, e.g, client release forms;
- o use experienced AAA staff to train and encourage new users; (This will build in the necessary trust needed to help workers over historical barriers to using technology.)
- o hold group "chat" sessions with workers to review the benefits and use of portable computers, enabling access by isolated elderly. Topics will include: how to discuss the computer with the client, timing of use, what to say about confidentiality, etc.
- The kiosk programs will have built in, simple, step-by-step instructions enabling the mobile elderly and their caregivers to screen for programs and to access information. This may also reduce the caseload and demands on agencies processing benefit applications by discouraging those who are ineligible from applying in the first place.

# What Community Support Do We Have For ASNet?

There is growing support for computerization throughout the Aging Network, both in NYS and in the Nation. This was evidenced at nine regional caucus meetings (on CBS) with the AAAs this year. The NYS AAA Association established a special committee to work with SOFA to bring computerization to the network.

We have also received numerous letters of support from the major national organizations representing this end user group as well as NYC based groups, such as the United Jewish Federation, who believe that this system will be of use to workers in their diversified network of service agencies. (see TAB: Support Ltrs)

The effort to draw community support and end user input will be vastly expanded under the ASNet Project. A Consortium consisting of two groups will be formed to advise the project. One group will consist of consumers, end users and advocate groups. The other will be comprise of technical specialists. (See TAB: Qual/Partner for list of members to be invited)

# How Will We Protect Privacy and Confidentiality?

Privacy issues and solutions are already being identified by other networks. The banking and credit industries are seeking ways to protect confidential information, especially that which will travel over the Internet. We will consult with those experts. We are currently exploring programs such as Pretty Good Privacy and Kerberos. NYSERNet will assist us in developing the security interface - that will, at a minimum, involve encrypting files, secured non-Internet directed packet transmissions over secured lines, digital signatures, and firewalls.

### Section 7: How Will We Know That The Project Is Successful?

The State University of New York will evaluate the project with the University's Center for Technology in Government (CTG). CTG was created by the State of New York in 1993 to pursue new ways of applying technologies directly to the practical problems of information management and service delivery in the public sector. (See TAB: Evaluation)

Evaluation will be summative and ongoing. The ongoing part will consist of stakeholder feedback into the design of each subsequent phase of the project as described in our work plan. (See TAB: Workplan/Timeline)

The summative evaluation will be comparative. It will address two outcomes of service integration: efficiency and effectiveness. We plan to compare ASNet vs non-ASNet counties (or providers). In some instances it might be more appropriate to compare baseline data (before ASNet) to current data (after ASNet).

The following measures will be used to assess the overall effectiveness of the project:

# Appropriateness of services provided - a measure of service integration effectiveness

This is a measure of the degree to which all of the services actually provided to a client are appropriate. Currently, for lack of complete and timely information about a client, workers might select unknowlingly overlapping services. Conversely, services that the client really needs might be overlooked. A key objective of ASNet is to provide staff with comprehensive and timely information about clients and the services they already receive, from all providers. Clients in areas covered by ASNet should receive a more appropriate package of services than clients in non-ASNet project areas.

#### Staff time per client - a measure of service integration efficiency

Take is a measure of the total amount of time spent by workers at each of the service providers that provide a service to an individual client. Currently, for lack of complete and timely information, each worker must interview the client to collect information that has already been recorded by staff at a different service provider. A key objective of the TIIAP project is to collect client data only once, and then share that data with other service providers as needed. The total staff time devoted to case management per client in areas covered by ASNet should be less than that in non-ASNet project areas.

Information resources - measures of the efficiency and effectiveness of access to, and availability of, aging related information resources

Information resources access is a measure of the time it takes for individual users to gain access to the information resources they need; information resources availability is a measure of the amount of information individual users actually locate. Currently, users (clients, providers, AAAs, SOFA staff) take a substantial amount of time to locate the information resources they need and feel frustrated by the inadequacy of their search effort. A key objective of the TIIAP project is to create a single directory and access point for a variety of aging related information (census data, research results, health advice, program data, evaluations, best practices, etc.). ASNet users should take less time to access information, and the information acquired should be more thorough.

Additional evaluation measures will be determined in the early phases of the project. Stakeholder groups will be asked to identify project objectives and evaluation measures that are pertinent from their perspective. The various stakeholder groups, and some assumptions about their desired outcomes are exhibited in Table 1 (See TAB: Evaluation). This stakeholder/outcomes matrix will provide the basis for better understanding the objectives of stakeholders, identifying outcomes germane to multiple stakeholders, and selecting key outcomes for which evaluation measures will be developed. Some examples of evaluation measures are given in Table 2. (See TAB: Evaluation)

#### **Evaluation Tools**

- experts to compare client care plans and outcomes of care plans in nondemonstration sites to assess effectiveness of service integration
- o survey research to collect objective as well as subjective (e.g., satisfaction) evaluation data using personal interviews, written questionnaires and on-line questionnaires (for users of Home Page and other electronic communications)
- o an automated reporting and data analysis function will be built into the system to accommodate the need for routine/standardized measures such as time it takes to perform functions, worker and system performance tracking, Home Page use, etc.

### **How Will We Disseminate ASNet?**

We will approach dissemination in two ways: 1) by informing and encouraging others to explore this system, and 2) seeding the use of this system by additional end users in NYS and around the country.

# 1) Our product will be packaged and reproduced.

The system design and method for ongoing technical support will be made available to aging network organizations for replication in other communities around the country.

#### 2) National aging organizations will assist in dissemination.

AOA, NASUA and N4A have all agreed to disseminate project results and encourage its adoption by the National Aging Network. (See TAB: Support Ltrs, for AOA, see TAB: Qual/Partner)

# 3) The ASNet Server will advertise the system, provide a demo and ordering information

Another unique method of dissemination will be our own ASNet Server - News and Events Section. We will enable a pull down demo version of CBS for interested parties and an online request area for more information with ordering instructions.

# 4) The ASNet Server will provide real time use of some applications.

We will provide access to CBS through links off the Home Page which enable users to do the following: self screen for benefits from the UNI-FORM BAS level one module; locate services through the I&R database, and, when fully developed, to screen for Long Term Care Services through the LTC Case Management Module. These will be accessible to end users around the nation. This will be especially useful for long distance caregivers and employee assistance staff who are attempting the difficult task of coordinating services for elderly persons residing in NYS.

# 5) Kiosks will advertise the System and provide help

We will join in a partnership, initially in NYC and later upstate, to provide information about the UNI-FORM BAS to the general public. In year one, kiosks in 6 sites, located in NYC, will contain self-screens and will produce a printout indicating which benefits the person might be potentially eligible for and where the closest UNI-FORM BAS application site is located. (See TAB: Quals/Partners, letter from Herbert Stupp, DFTA)